

Towards a Trauma-Informed Australian ECEC System

Considerations for System Change

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SVa



Acknowledgment of Country

Social Ventures Australia acknowledges and pays respect to the past and present traditional custodians and elders of this country on which we work.

'After the Rains' by Richard Seden for Saltwater People 2024

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Executive Summary

'Our systems don't recognise how trauma impacts people and as a result, decision makers in those systems create trauma and hold people in a space of trauma. If we don't talk about it and acknowledge it, then it's very difficult to bring about change.'ⁱ

Early childhood trauma is a widespread yet largely hidden problem in Australia. Recent research suggests that as many as two in three Australians experience some form of maltreatment during childhood and one in two Australian children are exposed to multiple adversities by middle-childhood.¹ Across Australia, early childhood education and care (ECEC) services are seeing increasing numbers of children attending with trauma-related needs, particularly following the COVID-19 pandemic.

The potential effects of trauma in early childhood can be overlooked - both because infants and young children may be unable to communicate about and may respond differently than older children and adults to a traumatic event. Yet trauma, and specifically toxic stress arising from repeated and enduring trauma, can have a range of adverse effects on all aspects of a child's development and functioning. Early childhood trauma can also have lasting impacts over the life course, accounting for a significant proportion of the burden of disease and increased risk of premature mortality. In an ECEC context, infants and young children who have experienced trauma may present with developmental delays as well as difficulties regulating their behaviour and emotions, engaging in learning and building trusting relationships and secure attachments with both their parents/carers and early years educators.

A comprehensive approach to addressing early childhood trauma requires strategies for prevention, early intervention and supporting healing and recovery. Alongside trauma-specific interventions that directly address the symptoms of trauma (such as evidence-based clinical therapies), trauma-informed approaches aim to provide a safe environment for clients/service users that is sensitive to the impacts of trauma and avoids re-traumatisation. Trauma-informed approaches are aligned with strengths-based, client-centred and culturally-safe models of care. They benefit all clients/service users irrespective of whether they have experienced trauma, as well as their families, carers, staff and the wider community. More broadly, trauma-informed approaches acknowledge and seek to redress the role that service systems have played, and continue to play, in causing harm to clients/service users who have experienced trauma through their inability to recognise, understand and respond effectively to those clients/service users' needs. As such, they are also an important strategy for systems change.

For young children, building secure, stable and nurturing relationships with parents/carers and early years professionals in ECEC and other systems of care is integral to healing and recovery from trauma. ECEC is uniquely placed to support children and families who have experienced trauma, and therefore, an important setting - and system - for implementing a trauma-informed approach. In Australia, the need for trauma-informed approaches in ECEC is heightened by the growing number of children presenting with trauma-related needs and the dual importance of supporting these children (including through clinical therapies and other trauma-specific interventions) and mitigating the impacts of this on early years educators' wellbeing and subsequent capacity to provide high quality education and care.

Trauma-informed approaches in ECEC is an emerging but growing area of research and practice, both in Australia and internationally. Over the past few years, the Alannah & Madeline Foundation (AMF) has been working with a range of partners, including Monash University's Health and Social Care Unit and Gowrie Victoria, to develop a trauma-informed approach for ECEC that responds to the pressing need for organisational change, driven by ECEC leaders, to support early years educators in adopting

¹ A Wainwright quoted in L Calderon de la Barca, K Milligan and J Kania, '<u>Healing Systems</u>', Stanford Social Innovation Review, 12 February 2024.

and sustaining trauma-informed practices. The Trauma Informed Organisations (TIO) approach seeks to build the capacity of organisations providing ECEC services in areas of high vulnerability and socioeconomic disadvantage to provide trauma-informed care and support to children, families and staff.

This paper has been developed in parallel to a business plan for an expanded place-based pilot of the TIO approach, to help shift the focus from organisational to systems-level change, and in particular, to support thinking about how to build towards a trauma-informed Australian ECEC system where all children, families and staff flourish, consistent with AMF's vision. It applies a systems thinking approach to understanding barriers and enablers of trauma-informed organisations and systems identified from a rapid review of published papers, mapping these against the six conditions of systems change - ie. policies, practices, resource flows, relationships and connections, power dynamics and mental models.

The mapping and analysis highlights a range of challenges and opportunities for realising a traumainformed ECEC system, driven particularly by the current reform context impacting ECEC and the wider early years ecosystem in Australia. A key insight that emerged from this work is the role that mental models may be playing in holding current conditions in the system in place and how reframing adversity, trauma and the role of trauma-informed approaches may help to facilitate the change that is needed to realise trauma-informed ECEC and other systems of care for young children and families. This includes recognising adversity and trauma as systemic rather than individual issues and that healing and recovery from trauma is possible, and most importantly, a collective responsibility. Current dialogue and momentum around universal ECEC and the creation of an integrated, holistic and inclusive Australian early years system with ECEC as the backbone is another significant opportunity to progress AMF's vision with the potential to advance shifts in both structural and relational conditions. These include prioritising a child-centred relational approach, empowering parents/carers, families and communities and facilitating effective interagency partnerships and interdisciplinary collaboration. A range of potential leverage points to enable a trauma-informed ECEC system, many of which could draw on learnings and insights from the place-based trial of the TIO approach, are also identified. These include mechanisms to strengthen ECEC workforce capability in trauma informed approaches (such as Communities of Practice, comprehensive pre-service and on-the-job training and relational support) and facilitate integrated practice in ECEC service settings (such as by investing in the 'glue' that is needed to support this work and growing the talent pool of integration leaders).

Finally, this paper sets out a proposed approach for progressing the systems-level work that is needed alongside the place-based pilot of the TIO approach to progress AMF's vision. It calls for a convenor to help mobilise the field to develop and implement a strategy for change with a focus on the structural and systemic barriers that could be prioritised for action at a national level. Consistent with the systems thinking approach underpinning this paper, it is proposed that this work is informed by a systemic inquiry process drawing on a range of systems thinking methods and tools. Five important considerations for initiating this work are also canvassed: role, boundaries, perspectives, connections and patterns. The relationship between the proposed systems-level work and place-based pilot, including the roles of each in shifting the conditions for systems change, is captured at Appendix 1.

Both AMF and Social Ventures Australia (SVA) are committed to transforming the ways that we protect and nurture the youngest and most vulnerable Australians. SVA hopes that this paper also provides a valuable and timely contribution to support broader discussions and the collaborative work that is needed to more effectively prevent and address early childhood trauma in Australia, and particularly, to progress trauma-informed and healing-centred approaches across all social service systems that are integral to children's early development.

Introduction

The Alannah & Madeline Foundation (AMF) is a national not-for-profit organisation dedicated to keeping children and young people free from violence and trauma wherever they live, learn and play.

From mid-late 2024, Social Ventures Australia (SVA) supported AMF to develop a business plan for an expanded place-based pilot of AMF's Trauma Informed Organisations (TIO) approach, which seeks to build the capacity of organisations providing early childhood education and care (ECEC) services in areas of high vulnerability and socio-economic disadvantage to provide trauma-informed care and support to children, families and staff. It is intended that the proposed pilot will test the TIO approach in different contexts and help to build the case for further expansion and funding. AMF's vision is for a trauma-informed Australian ECEC system where all children, families and staff flourish.

This paper has been jointly funded by AMF and SVA and developed in parallel to the business plan for the place-based trial of the TIO approach to support AMF and partners' thinking about how to build towards a trauma-informed Australian ECEC system. It is also intended to support broader discussions and the collaborative work needed to more effectively prevent and address early childhood trauma in Australia, and particularly, to progress trauma-informed and healing-centred approaches across all social service systems that are integral to children's early development.ⁱⁱ

Background

'Humans experience wellbeing when we have agency, dignity and health and are connected to ourselves, each other and our world in sustainable and life-giving ways. Trauma is the disconnection from these things.'ⁱⁱⁱ

Adversity & Early Childhood Trauma

Although there is no single, universally agreed definition of trauma, and the language used to describe and discuss it is constantly evolving, trauma is generally understood as a *response resulting from* an overwhelming, harmful or life threatening experience, series of events or ongoing conditions which *may have* lasting negative effects on all aspects of health and wellbeing^{iv} as well as functioning.²

Trauma may be caused by social, environmental and/or systemic factors. Examples of traumatic events and conditions include child maltreatment, family violence, sexual assault, road traffic accidents, terrorism, war, other 'human-made' disasters, natural disasters, poverty, racism and discrimination.³

Trauma may be experienced individually or collectively, including by a family, community or entire generation or culture.⁴ There are also several different *types* of trauma including:

• complex trauma - repeated and enduring trauma generally experienced in the context of interpersonal relationships, perpetrated by one person against another, often in early childhood⁵

ⁱⁱ Ten key systems are integral to children's early development and may therefore be understood as comprising Australia's early years system, namely: health, mental health, disability, ECEC, parenting and family support, child protection, family violence, housing, social security and community infrastructure.

^{III} I Njaka and D Peacock, 'Addressing Trauma as a Pathway to Social Change', Stanford Social Innovation Review, 21 January 2021.

iv Including physical, mental, emotional, spiritual and cultural health and wellbeing.

- vicarious trauma trauma that is experienced indirectly by witnessing or learning about others' traumatic experiences, often by first-responders and frontline practitioners who work directly and regularly with others who have experienced trauma, including complex trauma⁶
- *intergenerational trauma* unhealed trauma, whether individual or collective, that is passed from one generation to another, either epigenetically or through environmental conditions⁷, and
- historical trauma trauma that is caused by intentional harm and oppression against a group of people who share a common identity or circumstance, often also intergenerational in nature.⁸

Trauma may be understood as an *almost* 'universal part of the human experience' - global estimates suggest that more than seven in ten people experience at least one *traumatic event* in their lifetime.⁹ However, whether such events cause a *traumatic response* and if so, the nature, timing and duration of the effects on health, wellbeing and functioning, is unique to each individual and their context.

The prevalence and impacts of trauma varies within the community and across the life course.¹⁰ Young children are at heightened risk of experiencing trauma, including complex trauma, particularly due to exposure to 'adverse childhood experiences' (ACEs)^v - a term used to describe potentially traumatic events and/or ongoing conditions within a child's family or immediate social environment that are beyond their control. Examples include maltreatment (neglect and/or physical, sexual and/or emotional abuse), family violence, divorce/separation, parental substance abuse, parental mental illness, parental incarceration, having a family member attempt or die by suicide, poverty and racism.¹¹ ACEs are a risk factor for trauma for all children, irrespective of their socio-economic background.

Early childhood trauma is a widespread yet largely hidden problem in Australia and a neglected area of policy, research and clinical practice.¹² The Australian Child Maltreatment Study, the first nationally representative study of the prevalence and impacts of child maltreatment in Australia, found that around two-thirds (62.2%) of the Australian population had experienced at least one type of child maltreatment (ie. physical, sexual or emotional abuse, neglect or exposure to family violence) and more than one third (39.4%) had experienced multiple types of child maltreatment, prior to the age of eighteen.¹³ A separate nationally representative study drawing on the Longitudinal Study of Australian Children, found that one in two (52.8%) children had been exposed to two or more adversities by the age of 10-11 years.¹⁴ Across Australia, ECEC services are reporting increasing numbers of children attending ECEC who present with trauma-related needs, especially following the COVID-19 pandemic.¹⁵

Trauma, and particularly toxic stress arising from complex trauma, can have a range of adverse effects on a child's physiological, cognitive, behavioural, psychological and neurological development and functioning.¹⁶ Early childhood trauma can also have lasting impacts over the life course, accounting for a significant proportion of the burden of disease and increased risk of premature mortality.¹⁷ In particular, trauma arising from exposure to ACEs is a risk factor for all types of mental illness, self-harm and suicide as well as 'coping behaviours' such as substance abuse and interpersonal violence that carry additional risks to health and wellbeing and other adverse outcomes.¹⁸ Unhealed trauma lies at the heart of many, if not all, of the most complex social challenges and is a major barrier to achieving wellbeing at scale. It is an '*invisible force contributing to the 'stuckness' of virtually all social systems*'.¹⁹

The potential effects of trauma in early childhood can be overlooked - both because infants and young children may be unable to communicate about and may respond differently than older children and adults to a traumatic event. In an ECEC context, young children who have experienced trauma may present with developmental delays and difficulties regulating their behaviour and emotions, engaging

^v The term 'adverse childhood experiences' (ACEs) originated from the groundbreaking CDC-Kaiser Permanente ACE Study, led by Vincent Felitti and Robert Anda in the US in the mid-nineties, one of the largest investigations of childhood abuse and neglect and household challenges and later-life health and wellbeing.



in learning and building trusting relationships and secure attachments with parents/carers and early years educators, who they may rely heavily on to help co-regulate their emotions and feel safe.²⁰

Trauma-Informed Approaches

Healing from trauma is possible - with timely and appropriate care and support that focuses not only on minimising the impacts of trauma, but also restoring the conditions that contribute to wellbeing. These include, for example, safety, trust, agency, caring/supportive relationships, a sense of belonging, opportunities for meaningful participation, a strong sense of identity and connection to culture.²¹ It is also important to note that timely access to mental health services is critical to supporting individual recovery from complex trauma including the treatment of post-traumatic stress disorder (PTSD).

In a 'Western' social service delivery context, it is generally recognised that there are two key interrelated ways to supporting individual healing and recovery from trauma:

- *trauma-specific* interventions evidence-based programs and services, including clinical therapies, that directly address and seek to ameliorate the symptoms of trauma, and
- *trauma-informed approaches* models of care that aim to provide a safe environment for clients/service users that is sensitive to the impacts of trauma and avoids re-traumatisation.²²

To be effective, trauma-specific programs and services must be delivered within a trauma-informed setting. However, an organisation or system does not need to provide trauma-specific interventions such as clinical therapies or work directly with people who have experienced trauma, to adopt a trauma-informed approach.²³ Trauma-informed approaches are aligned with strengths-based, client-centred and culturally-safe models of care. They benefit all clients/service users irrespective of whether they have experienced trauma, as well as their families, carers, staff and the wider community.²⁴

Trauma-informed approaches emerged from the field of mental health more than two decades ago and have since been taken up across a range of other health and social care settings globally, marking an important paradigm shift in understanding trauma and pathways for healing and recovery. In essence, trauma-informed approaches acknowledge and seek to redress the role that social service systems have played, and continue to play, in causing harm to clients/service users who have experienced trauma through their inability to recognise, understand and respond effectively to those clients/service users' needs.²⁵ By helping to shift the conditions within systems that not only prevent individual and collective healing and recovery but also cause further trauma - such as disempowerment, lack of safety and discrimination – trauma-informed approaches are also an important strategy for systems change.²⁶

Although there is no single, universally agreed and adopted definition and model of a trauma-informed approach, the US Substance Abuse and Mental Health Services Administration (SAMHSA), a leading player in trauma-informed practice globally, defines a trauma-informed approach as:

'A program, organisation or system that is trauma-informed realises the widespread impact of trauma and understands potential paths for recovery; recognises the signs and symptoms of trauma in clients, families, staff, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, and practices, and seeks to actively resist re-traumatisation.'²⁷

More simply, Vivrette (2023) describes a trauma-informed approach as 'one where every level of an organisation or system has a basic understanding of trauma, how it can effect individuals, families and communities and how it can be addressed systematically in human service settings.²⁸



Trauma-informed approaches are underpinned by a consistent set of guiding principles which reflect the conditions for healing and recovery, including recognition of the systemic drivers of complex, intergenerational and historical trauma. SAMHSA's widely referenced <u>framework for implementing a</u> <u>trauma informed approach</u> identifies six key principles as illustrated in Figure 1 below.

Safety	Safety in physcial settings and interpersonal interactions
Trustworthiness and Transparency	Operations are conducted and decisions are made with transparency, consistency, respect, and fairness so as to build and maintain trust
B Peer Support	Support from those with lived experiences of trauma or, in case of children with history of trauma, their family members
Collaboration and Mutuality	Partnering, leveling of power differences between and among staff and clients
5 Empowerment	Individuals' strengths and experiences are recognized and built upon
6 Cultural, Historical, and Gender Issues	Organization moves beyond the cultural stereotypes and biases

Six Principles of a TIA

Figure 1: SAMHSA's Six Principles of a Trauma-Informed Approach 29

Implementing a trauma-informed approach involves embedding trauma-informed principles into all aspects of an organisation or system's structure, operations and culture. SAMHSA's framework identifies ten domains: governance and leadership; training and workforce development; cross sector collaboration; financing; physical environment; engagement and involvement; screening, assessment and treatment services; policy; progress monitoring and quality assurance; and evaluation.³⁰

Rather than representing a shift between two diametrically opposed states, implementing a traumainformed approach is generally recognised as a long-term, developmental process whereby an organisation or system moves through a series of stages to become trauma-informed. <u>The Missouri</u> <u>Model</u>, a developmental framework for trauma-informed approaches, defines four stages of change:

- *trauma aware* the organisation has become aware of how prevalent trauma is and has begun to consider that it might impact both the organisation's clients/service users and staff
- *trauma sensitive* the organisation has begun to explore (within their environment and daily work) and build consensus around the principles of trauma-informed care, consider the implications of adopting the principles within the organisation and prepare for change
- *trauma responsive* the organisation has begun to change its culture to highlight the role of trauma and staff at all levels begin re-thinking the routines and infrastructure of the organisation
- trauma informed the organisation has made trauma-responsive practices the organisational norm, the approach is accepted across the entire organisation and the organisation works with other partners to strengthen collaboration around being trauma-informed.³¹

There are a range of barriers and enablers of trauma-informed approaches at both an organisation and system level. These are discussed in the 'Identifying Conditions for Change' section of this paper.

Trauma-informed systems

People who have experienced trauma, including young children and families, often interact with a range of service delivery organisations and systems, including (but not always) in the context of addressing trauma-related needs. Additionally, experiencing a traumatic event such as violence, an accident or natural disaster, can bring children and families into sudden contact with many different systems such as police, ambulance and other emergency services, emergency relief, child protection and the courts, all of which can (and should) play an important role in helping to mitigate the impacts of this exposure.

The benefits of receiving trauma-informed care in one setting will be lessened when a trauma-informed approach is not provided in one or more others.³² For this reason, and particularly in the context of young children and families, there is growing recognition of the importance of system-level and multi-system adoption of a trauma-informed approach.³³ As described by Wall, Higgins and Hunter (2016):

'A systems approach to trauma-informed care means that implementation goes beyond individual practitioner and service organisation change to extend to whole systems that people who have experienced trauma are likely to interact with. [...This type of] systemic change is important because it enables people to receive services that are sensitive to the impact of trauma regardless of whether they enter through any particular service setting or intervention.³⁴

As screening for the signs and symptoms of trauma and/or exposure to ACEs in clients/service users is a core component of a trauma-informed approach, trauma-informed systems are an important early intervention strategy within the context of a broader public health approach to preventing and addressing the impacts of trauma in the community. Critically, for systems that offer universal services such as health and education, this early intervention has the potential for population-level reach.³⁵

Trauma-informed social service systems remain the exception rather than the norm in Australia today. Critically, despite evidence of the prevalence and impacts of early childhood trauma, Australia's early years system is not trauma-informed. Similarly, trauma-informed approaches are yet to be adopted universally by the many systems that are integral to children's early development, including ECEC. Consequently, not only are opportunities for early intervention being missed - both for children, their parents/carers and families <u>and</u> early years professionals and other staff - but those systems continue to generate further trauma. This was highlighted by the Early Years Catalyst's systems mapping process which found that 'families living with social or economic disadvantage are often stressed, stigmatised and feel disempowered by services that are not trauma-informed or culturally sensitive'.³⁶

Trauma-Informed ECEC

For young children, building secure, stable and nurturing relationships with parents/carers and early years professionals in ECEC and other systems of care is integral to their healing from trauma.

Given the relational nature of ECEC, particularly the relational pedagogy that underpins early years educators' practice, the significant amount of time that children and families spend in ECEC settings and the important role that ECEC services play as a point of connection for parents/carers in their community, ECEC is uniquely placed to support children and families who have experienced trauma. ECEC is therefore an important setting - and system - for implementing a trauma-informed approach.³⁷ In Australia, the need for trauma-informed approaches in ECEC is heightened by the growing number of children attending ECEC with trauma-related needs and the dual importance of supporting these children (including through trauma-specific interventions) and mitigating the impacts of this on early years educators' wellbeing and subsequent capacity to provide high quality education and care.³⁸

Trauma-informed approaches in ECEC is an emerging but growing area of research and practice, both in Australia and internationally.³⁹ Research to inform the development of AMF's TIO approach identified 'multi-tiered frameworks' which incorporate a combination of targeted programs for children at risk of trauma, individualised intensive support for children with significant trauma-related needs and workforce development, as a promising model for trauma-informed approaches in ECEC. AMF and partners' research has also identified the pressing need for organisational change, driven by ECEC leaders, to support early years educators in adopting and sustaining trauma-informed practices. This includes measures to redress the significant detrimental impacts of working with trauma-affected children on early years educators which is compounded by a range of factors including ongoing workforce pressures and a lack of professional supervision and formalised wellbeing supports.⁴⁰

Although not yet consistent across the sector, the important role that Australia's ECEC services play in supporting young children and families with trauma-related needs has been acknowledged by the Productivity Commission in the context of its recently completed inquiry into ECEC:

⁶While responses to trauma are primarily led by other services, ECEC providers play a crucial role in supporting affected children to access and participate in ECEC. Families who experience adverse life experiences or trauma may also struggle to consistently engage and participate in ECEC. Ensuring psychological inclusion may take many forms, from a child's safe transition to ECEC to providing trauma-informed practice, cooperating with non-ECEC agencies for a child's plan or facilitating targeted programs during class. Addressing these aspects, which build psychologically inclusive spaces, may encourage ongoing ECEC participation for the child.⁴¹

Australia's ECEC System

Australia's ECEC system (one of several sub-systems that make up the broader Australian early years system) is both large and complex. It consists of a range of service types and settings (ie. centre-based day care, preschool/kindergarten, family day care, in home care and outside school hours care) and different service providers (ie. private, not-for-profit, government and Aboriginal Community Controlled Organisations). There are currently approximately 19,000 ECEC services operating across Australia, including more than 9,200 centre-based day care services and around 4,300 dedicated preschools/kindergartens. Approximately 1.4 million children aged 0-12 years attend ECEC services each day. Australia's ECEC workforce consists of more than 200,000 individuals including early childhood educators, teachers, directors, other professionals and support staff. Responsibility for the ECEC system is shared between the Australian and state/territory governments.⁴²

Australia's ECEC system is currently undergoing an unprecedented level of review and reform to address significant structural and systemic issues that are impacting the quality, accessibility, affordability and inclusivity of ECEC. These include, but are not limited to, workforce shortages and high levels of staff turnover driven by low pay and poor conditions, increasingly complex workloads and the undervaluing of the ECEC profession; lower levels of participation in ECEC by children and families experiencing disadvantage and vulnerability; a need for improved cultural safety; and a lack of system stewardship by governments to address market failures driving access and affordability issues. Major inquiries by the Productivity Commission and Australian Competition and Consumer Commission, a South Australian Royal Commission into ECEC and other national reviews of aspects of the system including an ECEC workforce capacity study and a review of the Inclusion Support Program, have all been completed within the past twelve months. Other adjacent reviews, including the Review of the National Disability Insurance Scheme (NDIS) will also impact the ECEC system.



The Australian Government has committed to universal access to ECEC and several state/territory governments have made significant ECEC policy commitments, including but not limited to, major system re-design in South Australia and funding in several jurisdictions to expand access to three and four-year-old preschool/kindergarten. Other important recent developments in the broader early years ecosystem include the release of the Australian Government's ten-year Early Years Strategy and the establishment of the Investment Dialogue for Australia's Children, a ten-year collaboration between government and philanthropy to improve the wellbeing of children, young people and their families. Finally, there is now significant momentum at all levels of government and across philanthropy and the not-for-profit sector for the creation of an integrated, holistic and inclusive Australian early years system with ECEC as the backbone, connecting children and families to other services and supports.⁴³

The above context presents a range of challenges and opportunities for implementing a traumainformed approach in ECEC, and more broadly, realising the vision for a trauma-informed Australian ECEC system. These are set out in the 'Identifying Conditions for Change' section of this paper.

Systems Thinking for Systems Change

'Systems thinking goes beyond individual actions to connections, causes and consequences. Systems approaches incorporate tools and frameworks to help us do that, and to act in a way that reflects the complex and interconnected characteristics of our world. Systems are not external. We are part of them and we influence them...^{vi}

Systems thinking is an approach to addressing social challenges that reflects the complex, adaptive nature of the systems within which they occur. It provides a way to better understand problems and thereby enable more effective decision-making about how to solve them, by exploring and making sense of the surrounding system. Systems thinking is a way of 'seeing the system' which includes:

- being aware of the *boundaries* we draw to define the system
- embracing diverse *perspectives* different ways of seeing and knowing the system
- understanding connections between different parts of the system, and
- identifying *patterns* of behaviour caused by these connections at different levels of the system.

In the context of systems thinking, a system is understood in its broadest sense - one that involves the interaction of different actors and other parts (both tangible and intangible) that function in relationship to each other as a dynamic whole to produce an outcome. Systems exist at different scales. They are also networked, nested within and overlap with others. Exploration and sense making of any system is always based on the drawing of arbitrary boundaries which may shift as different lenses are used to understand it. Many systems are simple; most human systems are complex. Systems thinking requires us to embrace this complexity and to see ourselves as part of the systems that we seek to change.⁴⁴

Systems thinking - 'seeing the water we are all swimming in' - is essential for systems change.

The Water of Systems Change Framework

<u>The Water of Systems Change Framework</u> is a widely recognised, actionable model for those seeking to create lasting social change.⁴⁵ It is applicable to any system at any scale - eg. an organisation, partnership, network, community, place, sector, service delivery system or society.

The framework identifies six interdependent conditions that generally play a significant role in holding complex problems in place: policies, practices, resource flows, relationships and connections, power dynamics and mental models. As such, these conditions are also leverage points for change - parts of the system where we can intervene to disrupt, nudge or influence it towards a healthier, desired state.

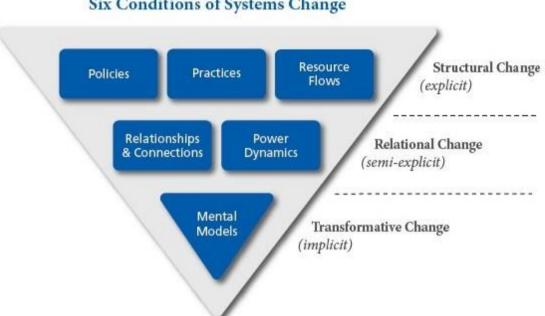
The six conditions exist at three different levels with respect to their visibility and ability to transform a system: structural change (explicit), relational change (semi-explicit) and transformative change (implicit) - see Figure 2. Desired shifts in system conditions are more likely to be sustained when working at all three levels of change. Further, as the six conditions are all interrelated and interconnected, they must be considered and addressed holistically in any systems change effort.

Structural conditions (ie. policies, practices and resource flows) are often the default starting place for organisations seeking to address social challenges. For many, these are the most tangible and readily understood conditions where change - such as legislative reform, additional funding or a new government strategy - can have a significant and observable impact on the system and the outcome(s)

^{vi} S Reynolds, '<u>Covid-19 means systems thinking is no longer optional</u>', New Philanthropy Capital (NPC) Blog, 9 April 2020.



it produces. However, without also attending to relationships and connections, power dynamics and mental models, shifts in structural conditions will be less effective and a system will tend to 'snap back' to its previous state over time. Relational conditions and mental models are often more challenging to address, yet these can provide deeper insight, including from different perspectives, into what is holding a complex problem in place - particularly in a place-based context where they are often more tangible and easier to navigate. As foundational drivers of a system's behaviour, shifting these conditions is essential to achieving transformational change.46



Six Conditions of Systems Change

SYSTEMS CHANGE CONDITIONS—DEFINITIONS

Polices: Government, institutional and organizational rules, regulations, and priorities that guide the entity's own and others' actions.

Practices: Espoused activities of institutions, coalitions, networks, and other entities targeted to improving social and environmental progress. Also, within the entity, the procedures, guidelines, or informal shared habits that comprise their work.

Resource Flows: How money, people, knowledge, information, and other assets such as infrastructure are allocated and distributed.

Relationships & Connections: Quality of connections and communication occurring among actors in the system, especially among those with differing histories and viewpoints.

Power Dynamics: The distribution of decision-making power, authority, and both formal and informal influence among individuals and organizations.

Mental Models: Habits of thought-deeply held beliefs and assumptions and taken-for-granted ways of operating that influence how we think, what we do, and how we talk.

Figure 2: The Six Conditions of Systems Change⁴⁷

'Seeing the Water': Identifying Conditions for Change

'The most important unit of analysis in a system is not the part, it's the relationships between the parts.'^{vii}

AMF's vision is for 'a trauma-informed Australian ECEC system where all children, families and staff flourish'. AMF and partners' work to date, through the development and initial pilot testing of the TIO approach, responds to the increasing focus on trauma-informed practice in ECEC in Australia, and in particular, the need for organisational change, driven by ECEC leaders, to support early years educators in adopting and sustaining trauma-informed practices. This work, informed by a range of stakeholders including early childhood educators, ECEC leaders and childhood trauma consultants, has surfaced several barriers and enablers of trauma-informed practice in ECEC - predominantly at the micro (ie. educators/frontline staff and leaders) and meso (ie. organisation and community) levels.⁴⁸

Building on this work and to support AMF and partners' thinking about how to progress the vision for a trauma-informed Australian ECEC system, SVA undertook a 'rapid review' of a selection of published documents examining barriers and enablers of trauma-informed organisations and systems. These include:

- a rapid review of literature describing enablers and barriers to effective implementation of trauma-informed approaches across different systems, organisations and workforces⁴⁹
- an analysis of 33 peer-reviewed studies which evaluate the implementation and effectiveness of trauma-informed approaches across nine service sectors⁵⁰
- a critical interpretive synthesis of 98 documents, both theoretical papers and empirical studies, focused on trauma-informed care within and across service systems⁵¹, and
- a review of more than 70 academic papers and other online publications reporting on organisation-wide trauma-informed implementation across a range of sectors and settings.⁵²

Overall, there appears to be a small albeit reasonably consistent body of published evidence and perspectives on the barriers and enablers of a trauma-informed approach (also described as 'trauma-informed practice' or 'trauma-informed care') at both an organisation and system level. However, discussion of system-level barriers and enablers is more limited and often relates to considerations for individual service delivery organisations within systems. The barriers and enablers identified also span different phases of change - ie. planning for, implementing and sustaining a trauma-informed approach.

It is important to acknowledge that the barriers and enablers of trauma-informed organisations and systems captured here have been distilled from online publications, including academic journal articles and government discussion papers and reports. This knowledge represents a largely privileged Western worldview with inherent blind spots. Due to time constraints, the rapid review did not examine First Nations models of trauma-informed care, healing and social and emotional wellbeing, yet these fields of First Nations wisdom and ways of knowing, being and doing undoubtedly offer significant learnings and insights to support AMF's vision. Further, the rapid review did not draw directly on knowledge held by children, families and others with lived experience of adversity and trauma. These important perspectives on the system - and how we think about both trauma and healing - should be prioritised in future work to build on the preliminary mapping and analysis set out in this paper.

vii B Zimmerman quoted in K Milligan, J Zerda and J Kania 'The Relational Work of Systems Change', Standford Social Innovation Review, 18 January 2022.



As presented below, the barriers and enablers identified from the rapid review have been mapped against the six conditions of systems change to support further thinking about 'what it will take' to realise an Australian ECEC system that is trauma-informed. These include general barriers and enablers that are applicable across a range of service systems and sectors as well as those that are specific to ECEC. The most frequently mentioned barriers and enablers relate to structural conditions (ie. policies, practices and resource flows) and to a lesser extent, relational conditions (ie. relationships and connections and power dynamics). Barriers and enablers at the transformative level were often not explicitly discussed in the literature reviewed. Many of the mental models captured below have been drawn from adjacent sources including systems change literature and the work of the Early Years Catalyst which explored the mental models underpinning Australia's early years system.⁵³

A high-level summary of the barriers and enablers identified, as well as some key observations relating to the Australian ECEC system, is presented below. Corresponding references are at Appendix 2.

Conditions	Barriers
Policies	General • Lack of overarching policy requiring systems to be trauma-informed • Lack of framework to guide implementation of a system-wide trauma-informed approach • Lack of clarity/shared understanding of what constitutes a trauma-informed approach • Institutional policy legacies creating resistance to trauma-informed care ECEC • Complexity of the Australian ECEC system including diversity of the ECEC sector
Practices	General • Complexity of implementing a trauma-informed approach including scope of change required • Structural barriers to undertaking trauma screening/routine enquiry • Lack of commitment/engagement from frontline practitioners • Frontline practitioner resistance to undertaking trauma screening/discussing trauma with clients • Boundaries of service provider/practitioner scope of practice ECEC • Early years educator wellbeing not adequately prioritised • Managing rather than understanding children's 'challenging' behaviour (eg. via exclusion)
Resource Flows	General• Workforce challenges - high staff turnover, staff shortages, challenging workloads• Lack of dedicated resources to support a trauma-informed approach: funding, staffing and time• Limitations in training offerings for staff re trauma and trauma-informed practice• Challenges to data sharing between services• Lack of evaluation evidence of the effectiveness/impact of trauma-informed approachesECEC• ECEC workforce challenges - high staff turnover, staff shortages, challenging workloads• Tight early years educator-child ratios• Limited time for professional development and reflective practice• Lack of pre-service/on-the-job training in trauma-informed practice for early years educators• Lack of wellbeing supports for early years educators• Complexity of process to secure additional funding to support children impacted by trauma

Barriers to Trauma-Informed Organisations and Systems



Relationships & Connections	 <u>General</u> Difficulties establishing and maintaining inter-agency/cross-sector partnerships driven by the siloed nature of systems and underpinning structures including regulation and funding <u>ECEC</u> Barriers to cross sector collaboration
Power Dynamics	 <u>General</u> Resistance to change in power dynamics in organisations and systems Service provider resistance to change Professional/practitioner resistance to change Avoidance of (acknowledging/addressing) trauma by those in positions of power <u>ECEC</u> Early years educator's lack of trust and perceived lack of respect from ECEC leaders ECEC leaders not actively listening to early years educators - 'voices not heard' Early years educators feeling undervalued/low status given to the ECEC profession
Mental Models	General • Adversity/social problems are inherent in individuals • Trauma is a weakness/an individual failing • Recovery from trauma is an individual's responsibility • What doesn't kill you, makes you stronger • Adversity is destiny • Trauma is a problem too big to be fixed • Children are too young to be affected by trauma • Trauma is something that only 'other people' experience • Denial of inter-generational trauma experienced by First Nations people and communities • The family is private • Children are not a collective responsibility • Only bad mothers/abnormal families need outside help • Caring is not real work • Philosophical/ideological differences between sectors/professions that need to work together ECEC • Lack of community recognition of the complexity and value of ECEC • Undervaluing/underappreciating early years educators and the ECEC profession • Early years educator's low self-efficacy re trauma-informed practice • Viewing a child's behaviour as a reflection of their 'individual deficits'

Key observations: problematic patterns

Following are some initial observations about the barriers identified above which illustrate *problematic patterns in the system* that may impede progress towards a trauma-informed Australian ECEC system.

Policies

 There is currently no overarching vision for, or commitment to, a trauma-informed ECEC system (or broader early years system) in Australia - and despite evidence of the increasing prevalence of trauma in children attending ECEC.⁵⁴ Discussion of trauma and trauma-informed approaches in ECEC is also largely missing from key government strategies and frameworks. In particular:

- the Australian Government's Early Years Strategy 2024-2034 mentions trauma once, noting that '*All services (for children and families) should be... trauma-informed*' ⁵⁵
- the National Quality Framework (NQF), which provides a national approach to regulation, assessment and quality improvement for ECEC and outside school hours care services across Australia, does not currently require these services to be trauma-informed
- the Early Years Learning Framework (EYLF) V2.0 which aims to support early years educators and promote children's learning from birth to 5 years, references trauma-informed practice twice, noting that early years educators support children to 'learn to interact in relation to others with care, empathy and respect' when they 'provide secure and predictable environments, relationships and engagement in learning to support children affected by trauma' (Outcome 1) and 'adopt trauma-informed practices to enhance the safety and wellbeing of children who have experienced adversity' (Outcome 3)⁵⁶, and
- 'Shaping Our Future', the ten-year national ECEC workforce strategy released in 2021, mentions trauma once noting under the priority area 'Leadership and Capability', the need to 'develop and implement a priority list of micro-credentials for educators and teachers in recognised areas of demand and need' including 'dealing with childhood trauma'.⁵⁷

Practices 2 1

- Discussion of trauma-informed practice in ECEC in Australia across recent review and inquiry reports is largely focused on the need to equip early childhood educators with the knowledge and skills to work with a subset of children attending ECEC in a trauma-informed way. In particular, trauma-informed practice is predominantly framed as a specialist role and in the context of improving inclusion in ECEC for children with trauma-related needs. There does not appear to be any reference to the adoption of a trauma-informed approach at an organisation or service system level, and similarly, little if any reference to the potential benefits of trauma-informed practice for all children attending ECEC as well as their families, early childhood educators and other ECEC staff (ie. given the prevalence of adversity and trauma in the community). In these contexts, trauma-informed practice is also not identified as a driver of quality ECEC, early years educator wellbeing and/or improved ECEC workforce retention.⁵⁸
- Discussion of current ECEC workforce challenges, including in recent review and inquiry reports, identifies both the need for pre-service training and professional development activities to support early years educators to work with children with trauma-related needs <u>and</u> improved wellbeing supports for early years educators but does not explicitly connect these two issues. In particular, discussion of early years educators who experience vicarious trauma through their work with affected children and families or for those with lived experience of trauma. Similarly, discussion of trauma-related training and professional development for early years educators does not consider the integral connection between early years educators' wellbeing, effective trauma-informed practice and the wellbeing of children with trauma-related needs.⁵⁹

Resource Flows

• Recent inquiries into different aspects of the Australian Government's Child Care Subsidy (CCS) funding system, including the activity test and the Additional Child Care Subsidy (ACCS), have highlighted significant barriers to affordable access to quality ECEC for many children. The funding system plays a major role in determining who can access, for what dosage and to

what quality of service. Many features of the funding system drive the purpose of the ECEC system as enabling workforce productivity, looking after children while parents and carers work.

- There is currently no dedicated funding to support trauma-informed practice in ECEC services across Australia, including funding for training and ongoing support for early years educators.
- The NQF sets out early years educator-to-child ratio requirements for ECEC services, which
 combined with increasingly complex workloads, are not conducive to trauma-informed practice.
 In particular, early years educators do not have sufficient time for reflective practice,
 professional development activities and conversations with other early years professionals who
 are also providing care and support to children attending ECEC with trauma-related needs.⁶⁰
- There is no consistent or standardised approach to teaching about trauma-informed practice across the range of vocational education and training (VET) and higher education qualifications that provide entry to early years educator and teacher roles. Jobs and Skills Australia's recently released ECEC workforce capacity study identifies 'trauma-informed approaches' as a critical area of curriculum for development and inclusion in ECEC qualification courses. However, the study also found that there is widespread concern across the ECEC sector that the current content of the Certificate III in Early Childhood Education and Care, which is the main workforce qualification across all service types, is already too complex and broadly focused.⁶¹
- There is currently insufficient investment in, and other structural barriers to enabling suitable ongoing professional development for early years educators, including the difficulties in, and costs associated with, backfilling roles to meet prescribed staff ratios while educators attend professional development activities.⁶² Further, as noted by Goodstart Early Learning, *'currently, the award mandates just two hours per week for programming and planning (...) and provides no minimum for professional development... the funding system does not provide support for staff activities. For example, child-free planning days are not covered by CCS funding'.⁶³*

Relationships & Connections

There is no single, clearly defined early years system in Australia in a structural sense. Rather, there are numerous social service systems that are integral to children's early development and these exist in a complex and fragmented landscape. The Early Years Catalyst identified ten 'systems' that are critical to children and families in some way: health, mental health, disability, early learning, child protection, parenting and family supports, family violence, social security, secure and affordable housing and community development. These systems operate in silos without integration or coordination and as such, they are unable to respond holistically to the needs of children and families, particularly those experiencing disadvantage and vulnerability.⁶⁴

Power Dynamics

- Unequivocally, many early years educators feel undervalued by society, government, ECEC directors and parents and frustrated with the low status given to the ECEC profession driven by poor pay and benefits and increasingly complex workloads. Recent research on work-related wellbeing and workplace culture and climate in ECEC in Australia identified power as an intersecting issue, with some ECEC staff expressing concern over the hierarchical power structures that exist in the ECEC sector, determined by both 'race' and level of education.⁶⁵
- Empowerment (or power sharing and the levelling of power differences all of which challenge prevailing power dynamics) is a key principle underpinning a trauma-informed approach. To be trauma-informed, the ECEC system must embody this principle in how it operates, delivers



services and empowers its staff, children, families and members of the community.⁶⁶ Carter and Blanch (2019) note that '*implementation of this principle often lags behind others because it directly challenges the power hierarchies present in organisations and communities*'.⁶⁷

Mental Models

• As outlined above, trauma-informed practice in ECEC in Australia is predominantly framed as a specialist role to support inclusion for children with trauma-related needs. While this focus is critically important, and particularly given the increasing prevalence of trauma in children attending ECEC, this framing risks reinforcing trauma as an individual issue which focuses attention on the treatment of trauma symptoms. As such, it creates a collective blind spot to the root causes and collective and systemic nature of trauma including poverty and racism.⁶⁸

Enablers of Trauma-Informed Organisations and Systems

Condition	Enablers
Policies	General• A long-term commitment from government and all levels of the system to trauma-informed care• An overarching policy framework to support a shift towards trauma-informed systems of care• An implementation plan/strategy and change management approach• Alignment of organisation/system-level policy and procedures with trauma-informed principlesECEC• Trauma-informed practice is embedded in key ECEC policies and frameworks (NQF, EYLF)• ECEC services operate within a trauma-informed ecosystem
Practices	 <u>General</u> Organisational readiness to change/supportive organisational culture Flexibility/adaptation of trauma-informed approach to suit context Adoption of universal trauma screening/routine enquiry Developmental approach to implementing a trauma-informed approach and evaluation <u>ECEC</u> ECEC organisation readiness to change/supportive organisational culture ECEC organisations are safe for children, families and staff Responsibility for being trauma-informed resides across the whole organisation Engagement across and within all levels of ECEC organisations Whole of organisation commitment to a relational approach Adaptation of trauma-informed approach to suit local/cultural contexts
Resource Flows	 <u>General</u> Workforce development: comprehensive training and ongoing on-the-job support Formalised health and wellbeing supports for staff/staff self-care Adequate and sustainable resourcing/fit-for-purpose funding models An adequate/longer-term timeframe for implementation Availability of appropriate treatment/support services to meet client/service user needs Safe physical environments Data sharing/data platforms Training/education for parents, carers and people with lived experience

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	 ECEC Awareness and understanding of trauma Training and ongoing support for early years educators Funding models that reflect time/resourcing needed to create trauma-informed environments
Relationships & Connections	General • Mechanisms to support/enable effective interagency partnerships/cross-sector collaboration • Supportive and trusting relationships with parents/carers and families ECEC • Interdisciplinary collaboration with external professionals • Cross-sector collaboration based on shared understanding and language • Partnerships between ECEC services and families • Whole of organisation commitment to a relational approach
Power Dynamics	General Strong/effective leadership and governance Leadership buy-in/champions to drive organisational change Governance/leadership includes service users/lived experience and frontline practitioners Engagement, involvement and empowerment of service users/those with lived experience Cultural safety/cultural competence Organisational culture reflects trauma-informed principles Flattening of organisational hierarchies/power differentials ECEC Engagement of different levels of ECEC leadership to help promote 'buy-in' ECEC leaders drive organisational change Service user (children, parents/carers, families) involvement at all levels of the organisation Flattening of power differentials in ECEC organisations
Mental Models	 <u>General</u> Adversity and trauma are widespread - although not equally distributed in society Healing and recovery from trauma is possible Preventing trauma and supporting healing and wellbeing is a collective responsibility Unhealed trauma is at the heart of almost all complex social issues Addressing unhealed trauma is integral to systems change All children have the right to thrive Cultural humility/cultural competence Valuing care in all its forms ECEC Trauma-informed mindset is held by all ECEC staff

Key observations: future possibilities

Following are some initial observations about the enablers identified above which illustrate some *future possibilities* that may support progress towards a trauma-informed Australian ECEC system.

Policies

• There is currently unprecedented opportunity for reform of Australia's ECEC system (and broader Australian early years system) which could help to facilitate a national policy

commitment to trauma-informed ECEC and other systems of care for young children and families. The Australian Government has committed to universal access to ECEC that is high quality, equitable, affordable and accessible and there is significant momentum at all levels of government and across philanthropy and the not-for-profit sector for the creation of an integrated, holistic and inclusive Australian early years system with ECEC as the backbone, connecting children and families to other services and supports.⁶⁹ The draft National Vision for ECEC developed by the Australian and state/territory governments also addresses the historic tension in governments' objectives for the ECEC system, recognising that ECEC is integral to children's learning, development and wellbeing (alongside workforce participation). The draft National Vision, together with recent reviews and inquiries, also identify the ECEC workforce - and particularly relationships between early years educators and children and families - as the foundation of the system and a critical enabler of governments' vision for universal ECEC.⁷⁰

- More broadly, there are other helpful precedents to build support for collective action to better • prevent and address trauma and support recovery, healing and wellbeing for children, families and communities. The National Plan to End Violence against Women and Children 2022-2032 recognises the need for trauma-informed services and systems to support victim-survivors of gender-based violence, including children. One of ten actions in the First Action Plan (2023-2027) is 'Build the capacity of services and systems that support victim-survivors to provide trauma-informed, connected and coordinated responses that support long-term recovery. health and wellbeing'. The Outcomes Framework 2023-2032 includes the sub-outcomes 'Systems and institutions are culturally safe, accessible, inclusive, trauma-informed and centre lived experience' (1.3) and 'Services and systems are evidence-informed, culturally safe, accessible, trauma and healing informed to meet the needs of all children experiencing violence and support their long-term recovery' (5.2).71 The Queensland Government, through the Queensland Mental Health Commission, has recently released The Queensland Trauma Strategy 2024-2029 which 'establishes a whole-of-government, whole-of-community approach for integrating trauma-informed practice across Queensland'. The strategy has four focus areas: prioritise the foundations for prevention; enhance early and compassionate support; reduce the impact of trauma and foster healing; and strengthen the systemic enablers for reform.⁷²
- The NQF, including the National Quality Standard (NQS), provides an entry point for a national framework to support the establishment of a trauma-informed Australian ECEC system.

Practices

- Relational practice, an approach that prioritises the development of positive interpersonal relationships to support client/service user outcomes, is integral to both ECEC and trauma-informed approaches. ECEC is a highly relational sector and relationships are foundational to high-quality ECEC practice, a principle enshrined in both the EYLF V2.0 and NQS. In particular, the EYLF V2.0 underpins the implementation of relational pedagogy 'the ways in which early years educators build trusting, respectful relationships between children, families, other educators and professionals as well as members of the community'.⁷³ The NQS includes a focus on respectful relationships between early years educators and children (Quality Area 5) and between ECEC services and families as well as the wider community (Quality Area 6).
- Reflective practice an ongoing, dynamic process that supports early years educators to selfassess and understand the impact of their professional practice on children's learning, development and wellbeing outcomes - is embedded in the NQS (Quality Area 1). Reflective practice is also consistent with the assumptions underpinning a trauma-informed approach.⁷⁴

Resource Flows

- The opportunity for reform of Australia's ECEC system includes a potential overhaul of the CCS funding system, with momentum building for a more child-centred funding system that supports affordability, access and inclusion for all children and overcomes key non-financial barriers to accessing ECEC. The Productivity Commission's inquiry into ECEC made a series of powerful findings in this regard, including recommending removal of the activity test which restricts children's access based on the hours of work completed by their parents/carers; modification of the CCS; an enhanced and expanded needs-based inclusion funding; and the establishment of an ECEC Development Fund and ECEC Inclusion Fund.⁷⁵ Significant support is also growing for an Aboriginal and Torres Strait Islander specific funding model to reflect the unique needs of Aboriginal and Torres Strait Islander early years services, children and families.⁷⁶
- Recent ECEC reviews and inquiries have called on governments to provide funding support for ECEC educators to undertake training and professional development activities in trauma-informed practice. Jobs and Skills Australia's ECEC workforce capacity study recommends that 'Governments should consider how funding might be made available to support educators to meet identified needs, including investment in evidence-informed trauma resources and trauma-informed training for educators, to support children with additional needs'.⁷⁷ The draft report from the Productivity Commission's inquiry into ECEC recommended that 'the Australian and state and territory governments should provide support for the ECEC workforce to undertake professional development activities targeted toward activities [...] that build staff capability to deliver more inclusive ECEC, including for children who have experienced trauma'.⁷⁸ The Productivity Commission's final report calls for governments to provide financial support for the ECEC workforce to undertake professional developments to provide the capability of staff and services to provide more culturally safe and inclusive ECEC.⁷⁹
- There are some existing streams of flexible funding that enable ECEC services to access training in trauma-informed practice (eg. Victorian Government School Readiness Funding). To address current barriers to accessing funding to ensure children with additional needs, including trauma-related needs, are adequately supported in ECEC, the Productivity Commission has recommended that the Australian Government make immediate changes to the Inclusion Support Program and develop and implement a new needs-based ECEC Inclusion Fund.⁸⁰
- Consistent with a trauma-informed approach, which includes safety in physical settings, ECEC centres are by nature, both safe and nurturing environments. This is mandated under the NQS through Quality Area 2 (Children's health and safety): 'Children have the right to experience quality education and care in an environment that safeguards and promotes their health, safety and wellbeing' and Quality Area 3 (Physical environment) 'Physical environment is safe, suitable and provides a rich and diverse range of experiences that promote children's learning and development'. Learning environments are one of seven practice areas set out in the EYLF V2.0 which notes that 'welcoming, safe and inclusive indoor and outdoor learning environments reflect, respect, affirm the identities, and enrich the lives of children and families'.⁸¹

Relationships & Connections

 As outlined above, the Australian Government has committed to universal access to ECEC and there is significant momentum at all levels of government and across philanthropy and the notfor-profit sector for the creation of an integrated, holistic and inclusive Australian early years system with ECEC as the backbone, connecting children and families to other services and supports. As noted by the Centre for Policy Development, 'ECEC services are often valued and

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trusted places in their communities [where] children and families spend significant time [and] build trusting relationships with ECEC educators. This puts ECEC in a strong position to connect children and families with other services and supports...⁸² The role of ECEC as the backbone of an integrated Australian early years system is gaining significant traction in advocacy and reform directions at all levels of government including in South Australia following the Royal Commission into ECEC which recommended that the State Government promote 'a vision of place-based, responsive and connected service delivery in the early years'.⁸³

- Also highlighted above, ECEC is a highly relational sector and relationships are foundational to high-quality ECEC, a principle enshrined in both the NQS and EYLF V2.0. The draft National Vision for ECEC, together with recent reviews and inquiries, also identify the ECEC workforce - and particularly relationships between early years educators and children and families - as the foundation of the system and a critical enabler of governments' vision for universal ECEC.⁸⁴ This aspect of the ECEC system is strengthened where underpinning structures, including policies, practices and resourcing support early years educators' to embed relational pedagogy.
- Improving integration, collaboration and coordination between early years services is a focus area in the Australian Government's Early Years Strategy 2024-2034. This includes working with state/territory and local governments, service providers, philanthropy and communities 'to make children's and parents' experiences of Australian Government funded services as seamless as possible'.⁸⁵ The Queensland Trauma Strategy 2024-2029 recognises that 'collaboration and partnerships are important to effectively prevent and reduce the impact of trauma' and that more needs to be done to 'reduce operational silos and promote systemic collaboration'. Enhancing 'collaboration, information sharing and cross-agency training to foster a shared understanding of trauma-informed principles across Queensland Government agencies' is a key action to strengthen cross-sector partnerships and collaboration.⁸⁶
- Developmental models of trauma-informed organisational change (such as The Missouri Model) can help to facilitate cross-sector collaboration and support new partnerships between services and sectors that traditionally work in silos, by providing a common language and framework to guide understanding and implementation of a trauma-informed approach.⁸⁷ The Queensland Trauma Strategy 2024-2029 sets out a practice framework, based on a developmental model of trauma-informed change, that captures 'different levels of traumainformed knowledge, capability and capacity' to facilitate a 'coherent way of working within [and across] organisations, agencies, [workforces,] systems and the broader community'.⁸⁸
- There is growing interest and momentum in scaling Child and Family Hubs which provide highquality integrated services and wrap around supports to meet the needs of children and families experiencing socio-economic disadvantage as well as a safe place in the community where they can spend time together and build connections and social networks. There are currently around 200 Child and Family Hubs across Australia, some of which provide ECEC services.
- To support connections between ECEC and other child and family services, the Productivity Commission has recommended that 'ECEC services should be permitted to use inclusion funding to liaise and coordinate with other services a child may require or be accessing, such as allied health or National Disability Insurance Scheme professionals'.⁸⁹

Power Dynamics

• Current dialogue and momentum around universal ECEC and the creation of an integrated, holistic and inclusive Australian early years system with ECEC as the backbone, prioritises both

a child-centred approach and empowering parents, carers, families and local communities. The Australian Government's Early Years Strategy 2024-2034 commits to: '*include the voices of children and families in the policies and decisions that affect them*', including by prioritising '*children's perspectives and keeping their wishes, feelings and expertise in focus*'; empower parents, caregivers and families including by ensuring services and supports are responsive and inclusive; and supporting local communities including by fostering shared decision-making.⁹⁰ The draft National Vision for ECEC identifies '*ensuring that services are shaped around the needs of families and communities of all backgrounds*' including First Nations families and communities, as a key enabler of the governments' vision.⁹¹

- The National Agreement on Closing the Gap, and specific mechanisms it has established, offer opportunities to shift power to shared decision-making with Aboriginal and Torres Strait Islander peoples. The Early Childhood Care and Development Policy Partnership, co-developed by SNAICC (the national peak body for Aboriginal and Torres Strait Islander children) and the Australian Government, is demonstrating how this can work with representatives from the Australian and state/territory governments as well as Aboriginal and Torres Strait Islander peak bodies and community representatives. It is strengthening shared understanding and relationships, as well as identifying and progressing reform opportunities, including for example, a new ECEC funding model for Aboriginal Community Controlled Organisations.
- Empowering families and communities to be active participants in decision-making about the systems that impact their lives and influence the early childhood development outcomes of their children was identified by the Early Years Catalyst as an essential component of a transformed Australian early years system. This work identified a range of ways to place 'communities and families in the driver's seat', which involve significant shifts in power, devolving decision-making to the local level and governments working in new ways with families and communities.⁹²
- Discussion of factors driving high staff turnover and ongoing staff shortages in ECEC in recent review and inquiry reports has acknowledged the need to address factors influencing early years educator's wellbeing and the extent to which they feel supported and empowered to undertake their work effectively. Although not addressed directly through recommendations, research cited by both the Productivity Commission and Jobs and Skills Australia identifies a number of factors that are linked to power dynamics in the workplace. These include supportive leadership, participative decision-making and positive relationships with colleagues.⁹³

Mental Models

- There is currently unparallelled interest, particularly from government and philanthropy, in the early years and early childhood development in Australia. Significant developments including the Australian Government's Early Years Strategy 2024-2034, the establishment of the Investment Dialogue for Australia's Children, multiple inquiries/reviews of the ECEC system, state/territory government investments in three and four-year-old kindergarten and sector led campaigns such as Thrive By Five, Act for Children and End Child Poverty, are helping to raise the profile and importance of the early years - and the right of all children in Australia to thrive.
- Current momentum and increased policy attention and investment in community-led, placebased change in Australia is a critical leverage point for strengthening communities and fostering conditions and opportunities for healing, resilience and wellbeing. Place-based approaches enable collective, community-led action to prevent and respond more effectively to adversity and trauma thereby helping to counter prevailing deficit-based and paternalistic



mental models which regard adversity and trauma as 'destiny' and 'a problem too big to be fixed' and/or limit the focus of intervention to the treatment of trauma symptoms in individuals.⁹⁴

• Finally, growing interest and work focused on healing-centred systems, driven particularly by social change-makers and the field of systems thinking, is helping to reframe trauma as a collective and near universal experience (although acknowledging its disproportionate impacts in the community), bringing discussion of trauma 'from the margins to the mainstream'. This healing-centred approach recognises (unhealed) trauma as a significant challenge to achieving wellbeing at scale and draws attention to the root causes and systemic nature of trauma, including poverty and racism. It also calls for collective healing, including the need to support the wellbeing of those who are working to support others - such as early years educators. Critically, this area of work may also help to foster a counter-narrative over the longer term to the prevailing belief that early childhood trauma is something that people never recover from.⁹⁵

Key Insights

The rapid review identified a range of barriers and enablers of a trauma-informed approach at both an organisation and system level which span the six conditions of systems change. The preliminary mapping and analysis presented above highlights some key challenges and opportunities for realising AMF's vision, driven by the connections that exist between different parts of (and conditions in) the system. While this reveals several problematic patterns which may impede progress towards a trauma-informed Australian ECEC system, it also reveals many future possibilities, driven particularly by the current reform context impacting Australia's ECEC system and the wider early years ecosystem.

Some potential leverage points

A selection of potential leverage points that have emerged from the preliminary mapping and analysis, including their linkages to the place-based pilot of the TIO approach, are provided in the text box below.

It is important to note that these suggested leverage points draw on a specific perspective on the system - ie. that captured in published literature which defines the ECEC system in terms of its structural features and service delivery settings. Other perspectives may see and know the system in different ways and look beyond the ECEC service system to other relevant systems (eg. family, culture, media and transport); they may therefore surface a different set of opportunities to create change.

Some Potential Leverage Points for Change

Policies

- Mobilise sectors and advocate for the development of national trauma-informed and healing-centred practice framework for child and family facing workforces. The first or second action plan under the Australian Government's Early Years Strategy 2024-2034 could provide a potential vehicle for this.
- Build evidence on the impact of the current system on child and family trauma and healing, as well as the benefits of trauma-informed approaches. This could leverage insights from the evaluation of the place-based pilot of the TIO approach which is designed to share ongoing learnings from different site contexts.
- Build the case and appetite for a national trauma and healing strategy.

Practices

- Raise the profile of trauma-informed and healing-centred approaches, which also foster the conditions for relational practice in ECEC settings. This could draw on the insights from the place-based pilot of the TIO approach, particularly the Community of Practice and relational support provided to ECEC services.
- Grow the talent pool of integration leaders by developing/updating training programs and professional learning focusing on the core skills/competencies for integration work. This could draw on insights from the place-based pilot of the TIO approach, particularly the TIO Guide for ECEC organisations, the Educator Practice Guide and the online portal where these assets and other resources are to be stored.
- Convene communities of practice for ECEC service leaders and early years educators to learn and grow in their trauma-informed and healing-centred practice. This could draw on the insights from the place-based pilot of the TIO approach which includes facilitated Community of Practice sessions for ECEC leaders.

Resource Flows

- Work with tertiary/TAFE institutes on trauma-informed and healing-centred qualifications and embed units within the curriculum of relevant VET and higher education courses for early years educators.
- Integrate a trauma-informed and healing-centred lens and support sector advocacy for a new ECEC funding model and improved workforce salary and conditions, including investing in the 'glue' for quality integrated practice. This could draw on the insights from the pilot of the TIO approach which has been designed to include funding to enable ECEC service providers to participate in Community of Practice sessions.
- Identify, develop and roll out best practice trauma-informed and healing-centred training and mentoring for families, carers, early years educators and ECEC leaders such as through the TIO approach..

Relationships & Connections

- Develop and promote tools for transdisciplinary and integrated practice.
- Recognise integration roles as distinct, helping to create a language and profile and incentivise them.
- Undertake policy development and advocacy to enable ECEC services to be a backbone for integrated child and family services and hubs.

Power Dynamics

- Conduct systemic inquiry process with diverse perspectives and develop systems change strategy for a trauma-informed and healing-centred ECEC system as proposed as part of the TIO pilot project.
- Build awareness of benefits of participatory governance in ECEC and model flat organisational structures.
- Embed and amplify children and families voices in the design and implementation of research, policy, advocacy and communications strategies relating to adversity, trauma and resilience.
- Enable community-led action to prevent and respond more effectively to adversity and trauma. This could
 draw on the insights from the place-based pilot of the TIO approach which has been designed to allow
 ECEC service providers to adapt the TIO approach to meet local needs.

Mental Models

- Develop resources on how to talk about trauma and healing drawing on framing research.
- Embed positive framing re adversity, trauma and resilience within sector.
- Media strategy to raise profile of trauma, its impacts, prevention strategies and pathways for healing.
- Develop and implement targeted micro, meso and macro interventions to disrupt key mental models.

The role of mental models

A key insight that has emerged from the mapping and analysis is the role that mental models may be playing in holding current conditions in the system in place - and how reframing adversity, trauma and the role of trauma-informed approaches may help to shift these mental models, and in turn, facilitate the structural and relational change needed to realise a trauma-informed Australian ECEC system.

The current lack of government vision for, or policy commitment to, a trauma-informed ECEC system appears to be mirrored across other portfolios that are integral to early childhood development outcomes. There are a limited number of current government policy frameworks that include an explicit commitment to establishing a trauma-informed approach at a service system level - notably The National Plan to End Violence against Women and Children 2022-2032, The Queensland Trauma Strategy 2024-2029 and NSW Health's Integrated Trauma-Informed Care Framework: My Story, My Health, My Future (2023). In other policy frameworks, references to trauma-informed approaches remain at a higher level such as a guiding principle for reform. For example, Safe and Supported - The National Framework for Protecting Australia's Children 2021-2031, includes *'trauma-informed, culturally safe and inclusive policies and action'* as one of six guiding principles.

The prevailing lack of trauma-informed social service systems in Australia may be attributed in part to the complexity of implementation.⁹⁶ However, it could also be explained by one or more underlying mental models relating to adversity and trauma, children and early childhood development and broader systemic issues including poverty and racism. For example, it could reflect a propensity to view trauma as an issue inherent in individuals, something that affects certain 'other people' and/or that '*whether a person bounces back from trauma is largely a matter of personal character and fortitude'* - all of which place the burden of healing and recovery on the individual rather than on the system.⁹⁷ It could also reflect an understanding of adversity as 'destiny' and/or trauma as 'a problem too big to be fixed'.⁹⁸

The FrameWorks Institute's recent framing work on adversity, trauma and resilience provides an invaluable starting place for better understanding mental models in this space. It demonstrates how framing strategies can be used to more effectively reach both government and public audiences to build support for trauma-informed approaches as well as the broader systemic change that is needed to prevent adversity and trauma and better support the conditions for healing, recovery and wellbeing. This work sets out seven recommendations for communication and advocacy efforts directed at both policymakers and the community to ensure that '*the story we tell*[...] *deepen*[s] *understanding, spark*[s] a sense of collective responsibility and offer[s] a sense of realistic hope'.⁹⁹ These are:

- *Make the story about community strength, not widespread trauma* positioning adversity and trauma as threats to strong, vibrant communities rather than isolated problems to be solved
- Always put the term 'trauma' in context of what comes before and after it trauma is one possible response to adversity and recovery is possible; position resilience as a possibility that society needs to support not a responsibility that communities need to shoulder
- Consistently point to the possibility of positive outcomes our collective response to trauma is what matters focus on this rather than on the adversity or trauma itself
- *Frame towards collective solutions* consistently signal that solutions exist change is both necessary and possible; frame the problem as a systemic issue and offer solutions (such as trauma-informed approaches) that are aimed at fixing conditions rather than fixing people

- Don't just name inequities, explain them consistently and explicitly connect adversity and trauma to social and economic injustice (including poverty and racism), but also talk about how to address these issues at scale rather than just describe them as underlying problems
- *Give examples from different stages of live* to make the case for a system-wide or multiagency approach, frame the issue as a widely shared public concern - adversity and trauma, and therefore healing and recovery, can be experienced at every age and stage of life, and
- Use a welcoming, accessible style always communicate about adversity, trauma and resilience in plain, everyday language that engages; avoid scientific/medical language.¹⁰⁰

Reframing the challenge

This paper has been developed to inform AMF and partners' thinking about how to build towards a trauma-informed Australia ECEC system where all children, families and staff flourish. Implementing a trauma-informed approach at both an organisation and system level is one way of achieving this vision.

Drawing on the insights that emerged from applying a systems thinking approach to the mapping and analysis of barriers and enablers, 'reframing the challenge' could help to avoid replicating problematic patterns in the system (ie. only seeing the ECEC system in terms of its structural features and service delivery settings) and thereby open up the 'solution space' to better realise AMF's vision for all children families and ECEC staff in Australia. Three key ways to do this are by:

- 1. shifting the focus from a 'trauma-informed ECEC system' to a 'trauma-informed and healing-centred ECEC system' or simply, a 'healing-centred ECEC system'
- 2. adopting a public health approach, and
- 3. using language centred on child wellbeing to cut through complexity, asking more directly '*What* will it take for all children in Australia to feel valued, loved and safe and how can Australia's ECEC system support and enable this?'.

Trauma-informed approaches are integral to supporting healing and recovery from trauma, and particularly for avoiding re-traumatisation, and as such, are an important strategy for systems change. However, a single focus on trauma-informed approaches can inadvertently reinforce unhelpful mental models that regard trauma as an individual issue and focus attention on 'fixing people' rather than recognising trauma as a systemic issue and building support for solutions that 'shift system conditions'.¹⁰¹ Alternatively, a focus on healing-centred systems can help to reframe trauma as a collective and near universal experience and promote a more holistic approach to supporting healing and recovery which includes restoring the conditions that contribute to wellbeing such as agency:

'A healing-centred approach to addressing trauma requires a different question that moves beyond 'what happened to you' to 'what's right with you' and views those exposed to trauma as agents in the creation of their own well-being rather than victims of traumatic events.'¹⁰²

Reframing the challenge to a 'trauma-informed and healing-centred ECEC system' or simply 'healingcentred ECEC system' would also help to ensure 'trauma' is always discussed in the context of both adversity and healing and address FrameWorks Institute's caution to avoid phrases such as 'traumainformed care' and 'trauma responsive approaches' in high visibility places including initiative names.¹⁰³



Linked to the above, adopting a public health approach (as underpins The Queensland Trauma Strategy 2024-2029) could also help to 'widen the aperture' of understanding about what it will take to realise AMF's vision and help to build support for a range of actions to prevent adversity and trauma and better support healing, recovery and wellbeing. Such an approach would draw attention to the root causes and collective and systemic nature of trauma, including poverty and racism, highlighting the need for strategies that extend beyond the ECEC service system. It could also help to build support for trauma-informed approaches as a key early intervention strategy with potential population reach, particularly in the context of universal ECEC, as well as the need to improve timely access to evidence-based trauma-specific interventions for children and families who have experienced trauma.

Finally, the challenge could also be re-framed by working with a child-centred wellbeing outcome, drawing on one of the six domains of The Nest wellbeing framework for children and young people, namely: 'Valued, Loved and Safe: Ensuring children feel valued in loving and secure environments'.¹⁰⁴ Rather than asking 'What will it take to realise a trauma-informed Australian ECEC system where all children, families and staff flourish?', this approach would ask 'What will it take for all children in Australia to feel valued, loved and safe and how can Australia's ECEC system support and enable this?'. Similar to the other ideas outlined above, this framing would broaden the solution space and help to challenge thinking - drawing on the voices of children (and their families) on the conditions that are needed to prevent adversity and trauma and better support healing, recovery and wellbeing.

Developing a Strategy for Change

'If you want to change the system, get the system in the room.'viii

This paper outlines some key considerations for systems change and explores both challenges and opportunities, identified through a rapid review of a selection of published literature, for realising AMF's vision. This provides a strong starting point for the next critical step - developing a strategy for change. It has implications for AMF and partners' work in service of the proposed place-based pilot of the TIO approach, particularly the systems-level work that has surfaced through the business planning process.

To support an effective place-based pilot of the TIO approach, we recommend that AMF and partners:

- consider whether the barriers and enablers of trauma-informed approaches explored in this paper have any implications for the proposed place-based pilot of the TIO approach
- consider if and how a broader focus on building healing-centred ECEC organisations could be explored within or alongside the proposed place-based pilot of the TIO approach
- consider embedding FrameWorks Institute's recommendations on framing adversity, trauma and resilience within the TIO approach assets and AMF's work in this space more broadly
- consider an evaluation approach for the proposed place-based pilot of the TIO approach that captures learning and insights about the six conditions of systems change
- consider whether the initial pilot of the TIO approach surfaced any learnings relating to the six conditions of systems change, particularly relational conditions and mental models, and
- support and participate in a broader systemic inquiry process (as outlined below), which includes identifying other leverage points where you have agency and authority to act that would enable trauma-informed approaches in ECEC organisations including the TIO approach.

In parallel to the roll out of the place-based pilot, with growing awareness of the prevalence and impacts of early childhood trauma and significant opportunities for progressing AMF's vision, there is a need for a convenor role to help mobilise the field around a nationally focused strategy for change. We recommend that this hypothesis be tested through a systemic inquiry process as outlined below.

The connection between the proposed systems-level work and place-based pilot of the TIO approach, including the roles of each in shifting the conditions of systems change, is captured at Appendix 1.

Convening a Systemic Inquiry

Systems change is about intentionally nudging, influencing and incentivising systems towards a healthier desired state so that they work better for the people, places and communities we care about. To do so requires shifting the conditions in the system that are holding a problem in place - ie. policies, practices, resource flows, relationships and connections, power dynamics and mental models.¹⁰⁵

Systems change is usually achieved through the accumulation of small shifts in system conditions or within sub-systems of a larger system over time. The process is non-linear, ongoing and evolving.¹⁰⁶

^{viii} Milligan et al.

Undertaking a systemic inquiry is integral to systems change. A systemic inquiry process is a learning process which consists of four interrelated elements as captured in Figure 3 below. These are:

- *Define situation* defining the boundaries of the system, identifying enabling factors to support the systemic inquiry process and convening a systemic inquiry group
- *Gain clarity* developing a deeper understanding of the problem and the surrounding system including the conditions or patterns in the system that are holding the problem in place
- *Find leverage* exploring promising opportunities for shifting the conditions in the system that are holding the problem in place, from where the group has agency and authority to act, and
- Act strategically designing and implementing a strategy for change that exploits the most promising leverage points for change, often through a process of prototyping and testing.

Each of the elements, and the overall systemic inquiry process, can be scaled to suit the resourcing, timeframes and context for any systems change effort. The four elements also form a continuous cycle of learning and adaptation with each iteration providing greater insight into the system.¹⁰⁷

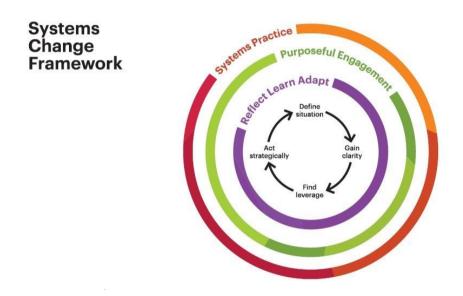


Figure 3: The Systems Change Framework - Systemic Inquiry Process¹⁰⁸

There are five important considerations for initiating a systemic inquiry process: role, boundaries, perspectives, connections and patterns. Each of these is discussed below.

Role

No single individual or organisation can meaningfully impact all six conditions of systems change alone. Rather, systems change requires collaboration between a committed group of actors who bring a diverse range of perspectives, knowledge, areas of expertise - and roles - to the table. One role that is needed in any systems change effort, and particularly to support a systemic inquiry process, is that of convenor (or 'coalition builder'). Wenger-Trayner (2021) describes a 'system convenor' as follows:

'A systems convener [...] sets up spaces for new types of conversations between people who often live on different sides of a boundary. Conveners spot opportunities for creating new learning spaces and partnerships that will bring different and often unlikely people together to engage in learning

across boundaries. A systems convener takes a 'landscape view' of wherever they are and what they need to do to increase the learning capability of that entire landscape...'¹⁰⁹

SVA's recent work on achieving impact at scale captures the role of 'coalition builder' as:

"...the glue between other roles, convening and brokering partnerships. They facilitate and encourage meaningful collaboration towards impact at scale, often between similar or complementary roles. This requires a high level of trust and credibility, as coalition builders can bring together unlikely partners to more effectively work together. Coalition builders often create new networks and unite communities towards achieving a shared goal of impact at scale.¹¹⁰

Convening the system in this way requires not only working across traditional boundaries (ie. 'how the system is understood') but also creating a safe container that allows participants to work together in ways that do not reinforce problematic patterns in the system, including prevailing power dynamics.¹¹¹ One potential container for convening the system in this way, drawing on recently published work by The Australian Centre for Social Impact (TACSI), is an impact network. As described by TACSI:

'Impact networks intentionally create relationships between people working in and between organisations, and then support them to collaborate in a way that shifts the status quo and advances systemic change. In practice, this means shifting any combination of relationships, mental models, practices, power dynamics, resource flows and policy toward a different, more preferable, future.'¹¹²

Boundaries

Systems thinking requires an awareness of the boundaries that are drawn to define a system. The first element in a systemic inquiry - 'define situation' - involves identifying the boundaries for this work.¹¹³

As previously highlighted, the mapping and analysis of barriers and enablers of trauma-informed approaches draws on a perspective which defines the ECEC system in terms of its structural features and service delivery settings. Different perspectives may draw different boundaries. Using a systems method such as 'The 5 Whys' can help to support decision-making about where to draw the boundaries of a system to guide the focus of a systemic inquiry process. This is illustrated in the box below.

The 5 Whys

Why do children feel valued, loved and safe?

Because all children have agency and are recognised and valued in a context where all families are seen as important as services.

Because children have quality relationships with early years educators and carers.

Because early years educators are paid as much as GPs as key nurturers of our babies and young children, their voices are listened to as much as ECEC managers and staff hold relationships across the local community that enable children's development and wellbeing to be supported in ways that they need.

Because families, early years educators and other practitioners work together and feel supported - they are equipped to support children and to continue learning and growing with children's needs.

Because national and state/territory policies and funding models are centred on child wellbeing and the diverse needs of children and their families.

Because the intent of the ECEC system is for all children to feel valued, loved and safe.

Perspectives

There are many different ways of seeing and knowing a system. Understanding diverse perspectives enables a deeper understanding of the system which is essential for systems change.¹¹⁴

To fully comprehend a problem and the conditions in the system that are holding it in place, and in turn, identify and pursue ways to shift those conditions to create change, it is vital to bring as many different parts of the system together as possible. In the context of progressing AMF's vision for a trauma-informed Australian ECEC system, this should include, but not be limited to, children, parents/carers and families, members of the wider community and other community groups, early years educators, ECEC leaders and other support staff, other early childhood professionals and services, funders, policy makers and regulators. The systemic inquiry should also be informed by a diversity of lived experience.

How each of these parts of the system are involved in the process and the roles(s) that they play may vary and change over time. Often a small group of interested participants will remain involved for the duration of the inquiry process (eg. in the form of an impact network), while other groups could be engaged in more targeted ways based on the different roles or areas of expertise that are needed at any given time. A key question that is constantly asked is: 'Who in the system needs to be present?'.¹¹⁵

Connections

Identifying the parts of a system that have a relationship to each other is an important lens for developing a deeper understanding of a problem and the conditions that are holding it in place. Similarly, creating new connections between different parts of a system can also generate new insights and thereby shift thinking about how a problem and the opportunities to create change are understood. One way to do this is by adopting a framing question to guide the systemic inquiry process.

As suggested further above, one option for this work would be to adopt a framing question based around a child-centred wellbeing outcome drawing on one of the six domains of The Nest wellbeing framework for children and young people, namely: '*Valued, Loved and Safe: Ensuring children feel valued in loving and secure environments*'.¹¹⁶ Rather than asking '*What will it take to realise a trauma-informed Australian ECEC system where all children, families and staff flourish?*', this approach would ask '*What will it take for all children in Australia to feel valued, loved and safe and how can Australia's ECEC system support and enable this*?'. This framing provides a way to cut through to the core of the issues and would help to challenge thinking and broaden the solution space on the conditions that are needed to prevent adversity and trauma and better support healing, recovery and wellbeing.

Patterns

No single intervention is likely to achieve systems change alone. A strategy to drive lasting change requires a suite of interventions targeting all levels of the system - ie. micro, meso and macro. Meso-level change is often achieved by communities, organisations and groups supporting innovation.¹¹⁷

A systemic inquiry process involves finding leverage in the system - ie. identifying and exploring the most promising opportunities for intervening in the system so as to disrupt, nudge or influence it towards a healthier, desired state. This involves finding ways to disrupt problematic patterns in the system which we then test by taking action. Taking action in the system requires a 'start anywhere' approach - and always from where we have agency and authority to act.¹¹⁸

The proposed placed-based pilot of the TIO approach is an invaluable starting point for taking action in the system - from where AMF and partners have agency and authority to act - through a 'test and learn' approach within the context of a systemic inquiry process. Including the pilot sites within the systemic inquiry process offers an opportunity to not only better understand the system conditions that enable a trauma-informed approach in ECEC services at a local level, but to also surface the structural and systemic barriers which could be prioritised for action at a national level as part of a broader strategy for change. Connecting the pilot and broader systemic inquiry process in this way would also enable local actors to engage with the systemic inquiry process and provide the national systemic inquiry group with real-time, on-the-ground intelligence about the conditions for change - particularly relational conditions which are often more tangible and easier to navigate in a place-based setting.

We recommend that the convenor work with AMF and partners' to design and facilitate an effective mechanism for connecting the place-based pilot of the TIO approach with the systems-level work.

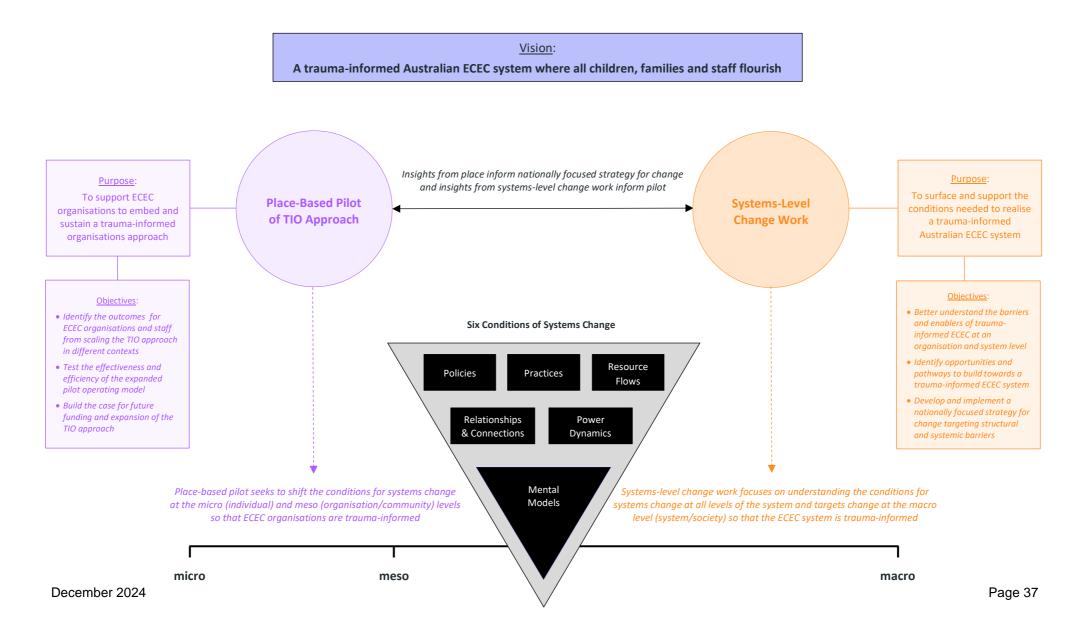
Conclusion

This paper has been developed in parallel to the business plan for an expanded place-based pilot of the TIO approach, which seeks to build the capacity of organisations providing ECEC services in areas of high vulnerability and socio-economic disadvantage to provide trauma-informed care and support to children, families and staff. It is intended to support AMF and partners' thinking about how to build towards a trauma-informed Australian ECEC system where all children, families and staff flourish.

In particular, this paper has applied a systems thinking approach to understanding the barriers and enablers of trauma-informed organisations and systems - many of which are addressed at an organisational level by the TIO approach - drawing on a rapid review of a small number of published papers. The mapping and analysis has revealed a range of challenges and opportunities for realising AMF's vision, driven by the connections that exist between different parts of the system and the current reform context impacting ECEC and the wider early years ecosystem in Australia. This paper has also identified a range of potential leverage points that would enable trauma-informed ECEC including the TIO approach. Finally, it sets out a proposed approach to progressing AMF's vision, which is centred around convening the system to develop and implement a nationally focused strategy for change.

More broadly, it is hoped that this paper also provides a valuable and timely contribution to support broader discussions and the collaborative work that is needed to more effectively prevent and address early childhood trauma in Australia and particularly, to progress trauma-informed and healing-centred approaches across all social service systems that are integral to children's early development.

Appendix 1: Connection Between Systems-Level Work and TIO Place-Based Pilot



Appendix 2: Mapping of Barriers and Enablers

Conditions **Barriers Policies** General Lack of overarching policy requiring systems to be trauma-informed See: L Wall, D Higgins and C Hunter, Trauma-informed care in child/family welfare services, CFCA Paper No.37, Melbourne, Australian Institute of Family Studies, 2016; M Bargeman, J Abelson, G Mulvale, A Niec, A Theuer and S Moll, Understanding the Conceptualization and Operationalization of Trauma-Informed Care Within and Across Systems: A Critical Interpretive Synthesis, Milbank Quarterly, 2022, 100(3):785-853, doi:10.1111/1468-0009.12579. Lack of framework to guide implementation of a system-wide trauma-informed approach See: Wall et al. Lack of clarity/shared understanding of what constitutes a trauma-informed approach See: Wall et al; Bargeman et al; P Carter and A Blanch, 'A Trauma Lens for Systems Change', Stanford Social Innovation Review, Summer 2019; Scottish Government Health and Social Care Analysis Unit, Evidence Review: Enablers and Barriers to Trauma-informed Systems, Organisations and Workforces, Scottish Government, 2023. Institutional policy legacies creating resistance to trauma-informed care See: Bargeman et al. ECEC Complexity of the Australian ECEC system including diversity of the ECEC sector See: Y Sun, H Skouteris, M Bowden, L Cameron C Blewitt C (a), 'It Takes Reflection at All Different Levels, Not Just People on the Floor: A Qualitative Exploration of Early Childhood Professionals' Experiences and Perspectives Towards Trauma-Informed Early Childhood Organisations', School Mental Health, 2024, doi:10.1007/s12310-024-09674-6. **Practices** General Complexity of implementing a trauma-informed approach including scope of change required See: Carter et al. Structural barriers to undertaking trauma screening/routine enquiry • See: Scottish Government; H Melz, C Morrison, E Ingoldsby, K Cairone and M Mackrain, Review of Trauma-Informed Initiatives at the Systems Level: Trauma-Informed Approaches: Connecting Research, Policy, and Practice to Build Resilience in Children and Families, James Bell Associates, 2019; Bargeman et al; L Bunting, L Montgomery, S Mooney, M MacDonald, S Coulter, D Hayes, G Davidson and T Forbes, Developing Trauma-Informed Care in Northern Ireland: The Child Welfare System, 2019. Lack of commitment/engagement from frontline practitioners See: Scottish Government; Melz et al. Frontline practitioner resistance to undertaking trauma screening/discussing trauma with clients See: Melz et al. Boundaries of service provider/practitioner scope of practice See: Bunting et al; Bargeman et al; K Magruder, N Kassam-Adams, S Thoresen and M Olff M, Prevention and public health approaches to trauma and traumatic stress: a rationale and a call to action, European Journal of Psychotraumatoly, 2016; doi:10.3402/ejpt.v7.29715. ECEC

Barriers to Trauma-Informed Organisations and Systems

• Early years educator wellbeing not adequately prioritised

	 See: Sun et al (a); Y Sun, M Bowden, L Cameron, H Skouteris and C Blewitt (b) 'Understanding the need and opportunity for a trauma-informed early childhood organisations (TIO) program using intervention mapping', Australasian Journal of Early Childhood, 2024, 49(2): 169–184, doi:10.1177/18369391241250103; C Blewitt, Y Sun, M Bowden and H Skouteris, Trauma-Informed Early Childhood Education and Care Organisations (TIO): An Intervention Mapping Project, Health and Social Care Unit, Monash University, Draft Report. Managing rather than understanding children's 'challenging' behaviour (eg. via exclusion) See: Blewitt et al; R Vivrette 'Considerations for Trauma-Informed Child Care and Early Education Systems' OPRE Report #2023-041, Office of Planning, Research and Evaluation, Administration for Children and Families, US Department of Health and Human Services, 2023.
Resource	General
Flows	Workforce challenges - high staff turnover, staff shortages, challenging workloads See: Melz et al; Bunting et al; Substance Abuse and Mental Health Services Administration (SAMHSA b),
	National Strategy for Trauma-Informed Care Operating Plan, 2021.
	Lack of dedicated resources to support a trauma-informed approach: funding, staffing and time
	See: Melz et al; Bunting et al; Bargeman et al; Scottish Government.
	Limitations in training offerings for staff re trauma and trauma-informed practice
	See: Scottish Government; Melz et al.
	Challenges to data sharing between services
	See: SAMHSA (b).
	Lack of evaluation evidence of the effectiveness/impact of trauma-informed approaches Sect SAMUSA (b): Decrement at all Wall at all Viewette: E Upphr and A De Viewer, Inforte and Viewer, Children
	See: SAMHSA (b); Bargeman et al; Wall et al; Vivrette; E Hoehn and A De Young, Infants and Young Children, Consultation Paper: Development of a whole-of-government Trauma Strategy for Queensland, Queensland Mental Health Commission, 2024.
	ECEC
	ECEC workforce challenges - high staff turnover, staff shortages, challenging workloads
	See: Sun et al (a); Sun et al (b).
	Tight early years educator-child ratios
	See: Sun et al (a).
	Limited time for professional development and reflective practice
	See: Sun et al (a); Blewitt et al.
	Lack of pre-service/on-the-job training in trauma-informed practice for early years educators
	See: Sun et al (a); Blewitt et al.
	Lack of wellbeing supports for early years educators
	See: Sun et al (a); Sun et al (b); Blewitt et al.
	Complexity of process to secure additional funding to support children impacted by trauma
	See: Sun et al (a); Blewitt et al.
Relationships	General
& Connections	Difficulties establishing and maintaining inter-agency/cross-sector partnerships driven by the
	siloed nature of systems and underpinning structures including regulation and funding
	See: Melz et al.
	ECEC Barriers to cross sector collaboration
	See: Sun et al (a); Blewitt et al.
Power	General
Dynamics	Resistance to change in power dynamics in organisations and systems
	I

• • • • •	 See: Carter et al; Bargeman et al; Wall et al. Service provider resistance to change See: Bargeman et al. Professional/practitioner resistance to change See: Bunting et al; Magruder et al. Avoidance of (acknowledging/addressing) trauma by those in positions of power See: L Calderon de la Barca, K Milligan and J Kania, 'Healing Systems', Stanford Social Innovation Review, 12 February 2024. CEC Early years educator's lack of trust and perceived lack of respect from ECEC leaders See: Blewitt et al; Sun et al (b). ECEC leaders not actively listening to early years educators - 'voices not heard' See: Blewitt et al; Sun et al (b). Early years educators feeling undervalued/low status given to the ECEC profession Sun et al (a); R Bull, L McFarland, T Cumming and S Wong, 'The impact of work-related wellbeing and workplace culture and climate on intention to leave in the early childhood sector', Early Childhood Research Quarterly, Vol 69, 2024: 13-24, doi:10.1016/j.ecresq.2024.06.002.
Mental Models G . .	Adversity/social problems are inherent in individuals See: Carter et al; Calderon de la Barca et al. Trauma is a weakness/an individual failing See: SAMHSA, Practical Guide for Implementing a Trauma-Informed Approach, Rockville MD, SAMHSA, 2023; Calderon de la Barca et al. Recovery from trauma is an individual's responsibility See: Calderon de la Barca et al. Recovery from trauma is an individual's responsibility See: Calderon de la Barca et al.; S Ginwright, 'The Future of Healing: Shifting from Trauma-Informed Care to Healing Centred Engagement', Medium, 1 June 2018. 'What doesn't kill you, makes you stronger' See: J Sweetland, Framing Adversity, Trauma and Resilience, Washington DC, FrameWorks Institute, 2024. 'Adversity is destiny' See: Sweetland. 'Trauma is a problem too big to be fixed' See: Sweetland. Children are too young to be affected by trauma See: Hoehn et al. Trauma is something that only 'other people' experience See: Calderon de la Barca et al. Denial of inter-generational trauma experienced by First Nations people and communities See for example: Calderon de la Barca et al. The family is private See: F McKenzie and E Millar, System Mapping Report: Mapping the systems that influence early childhood development outcomes, 2022, Prepared by Orange Compass for the Early Years Catalyst, August 2022. Child development is simple See: A Finlay-Jones, A Gregory, J Penny, R Cahill, F Mitrou and Y Harman-Smith, Mental models underpinning early child development systems and outcomes in Australia, 2024, Report prepared for the Early Years Catalyst.

Children are not a collective responsibility
See: Finlay-Jones et al.
Only bad mothers/abnormal families need outside help
See: McKenzie et al.
Caring is not real work
See: McKenzie et al.
• Philosophical/ideological differences between sectors/professions that need to work together
See: Wall et al.
ECEC
Lack of community recognition of the complexity and value of ECEC
See: McKenzie et al.
Undervaluing/underappreciating early years educators and the ECEC profession
See: Sun et al (a); Bull et al.
Early years educator's low self-efficacy re trauma-informed practice
See: Sun et al (a); Blewitt et al.
Viewing a child's behaviour as a reflection of their 'individual deficits'
See: Blewit et al.

Enablers of Trauma-Informed Organisations and Systems

Condition	Enablers
Policies	 General A long-term commitment from government and all levels of the system to trauma-informed care See: Carter et al; Wall et al; Queensland University of Technology and the Australian Childhood Foundation, National Guidelines for Trauma-Aware Education, 2020. An overarching policy framework to support a shift towards trauma-informed systems of care See: Wall et al; Bargeman et al; D Yatchmenoff, 'Creating the Conditions for Change: Emerging Policies to Promote and Support Trauma-Informed Care', Focal Point: Young Adults & Mental Health, Trauma-Informed Care, 2015, v.29; J Brennen, K Guarino, J Axelrod and S Gonsoulin, Building a multi-system trauma-informed calaborative: A guide for adopting a cross-system, trauma-informed approach among child-serving agencies and their partners, 2019, Chicago, IL: Chapin Hall at the University of Chicago & Washington, DC: American Institutes for Research; Melz et al; Queensland University of Technology et al. An implementation plan/strategy and change management approach See: Wall et al; Queensland University of Technology et al. Alignment of organisation/system-level policy and procedures with trauma-informed principles See: SAMHSA; Bunting et al; Queensland University of Technology et al. Trauma-informed practice is embedded in key ECEC policies and frameworks (NQF, EYLF) See: Blewitt et al. ECEC Trauma-informed practice is embedded in key ECEC policies and frameworks (NQF, EYLF) See: Blewitt et al.
Practices	 <u>General</u> Organisational readiness to change/supportive organisational culture

	See: SAMHSA; Scottish Government; Melz et al; Wall et al.
	Flexibility/adaptation of trauma-informed approach to suit context
	See: Scottish Government.
	Adoption of universal trauma screening/routine enquiry
	See: SAMHSA; Scottish Government.
	Developmental approach to implementing a trauma-informed approach and evaluation
	See: Carter et al; SAMHSA.
	ECEC
	 ECEC organisation readiness to change/supportive organisational culture
	See: Sun et al (b); Y Sun, C Blewitt, V Minson, R Bajayo, L Cameron and H Skouteris (c), 'Trauma-informed Interventions in Early Childhood Education and Care: A Scoping Review', Trauma, Violence and Abuse, 2024, 25(1):648-662, doi:10.1177/15248380231162967.
	ECEC organisations are safe for children, families and staff
	See: Blewitt et al.
	Responsibility for being trauma-informed resides across the whole organisation
	See: Blewitt et al.
	Engagement across and within all levels of ECEC organisations
	See: Sun et al (a).
	Whole of organisation commitment to a relational approach
	See: Sun et al (a); Blewitt et al.
	Adaptation of trauma-informed approach to suit local/cultural contexts
	See: Sun et al (c).
Resource	General
Flows	Workforce development: comprehensive training and ongoing on-the-job support
	See: Scottish Government; Wall et al; SAMHSA; Bargeman et al; Brennan et al; Melz et al; SAMHSA (b); Bunting et al; Queensland University of Technology et al.
	Formalised health and wellbeing supports for staff/staff self-care
	See: Scottish Government; SAMHSA; Bargeman et al; Melz et al; Bunting et al; Government of Nova Scotia, Trauma-informed practice at the agency, interagency and leadership levels, 2015, A Discussion Guide for Health and Social Service Providers, Government of Nova Scotia.
	Adequate and sustainable resourcing/fit-for-purpose funding models
	See: Melz et al; Wall et al; SAMHSA.
	An adequate/longer-term timeframe for implementation
	An adequate/longer-term timeframe for implementation See: Scottish Government; Queensland University of Technology et al.
	See: Scottish Government; Queensland University of Technology et al.
	 See: Scottish Government; Queensland University of Technology et al. Availability of appropriate treatment/support services to meet client/service user needs
	 See: Scottish Government; Queensland University of Technology et al. Availability of appropriate treatment/support services to meet client/service user needs See: Bunting et al; SAMHSA.
	 See: Scottish Government; Queensland University of Technology et al. Availability of appropriate treatment/support services to meet client/service user needs See: Bunting et al; SAMHSA. Safe physical environments
	 See: Scottish Government; Queensland University of Technology et al. Availability of appropriate treatment/support services to meet client/service user needs See: Bunting et al; SAMHSA. Safe physical environments See: Bunting et al; Brennan et al; SAMHSA.
	 See: Scottish Government; Queensland University of Technology et al. Availability of appropriate treatment/support services to meet client/service user needs See: Bunting et al; SAMHSA. Safe physical environments See: Bunting et al; Brennan et al; SAMHSA. Data sharing/data platforms
	 See: Scottish Government; Queensland University of Technology et al. Availability of appropriate treatment/support services to meet client/service user needs See: Bunting et al; SAMHSA. Safe physical environments See: Bunting et al; Brennan et al; SAMHSA. Data sharing/data platforms See: Melz et al; Bunting et al.
	 See: Scottish Government; Queensland University of Technology et al. Availability of appropriate treatment/support services to meet client/service user needs See: Bunting et al; SAMHSA. Safe physical environments See: Bunting et al; Brennan et al; SAMHSA. Data sharing/data platforms See: Melz et al; Bunting et al. Training/education for parents, carers and people with lived experience
	 See: Scottish Government; Queensland University of Technology et al. Availability of appropriate treatment/support services to meet client/service user needs See: Bunting et al; SAMHSA. Safe physical environments See: Bunting et al; Brennan et al; SAMHSA. Data sharing/data platforms See: Melz et al; Bunting et al. Training/education for parents, carers and people with lived experience See: Scottish Government.
	 See: Scottish Government; Queensland University of Technology et al. Availability of appropriate treatment/support services to meet client/service user needs See: Bunting et al; SAMHSA. Safe physical environments See: Bunting et al; Brennan et al; SAMHSA. Data sharing/data platforms See: Melz et al; Bunting et al. Training/education for parents, carers and people with lived experience See: Scottish Government.

Relationships	 See: Sun et al (c); Hoehn et al. Training and ongoing support for early years educators See: Sun et al (c); Sun et al (a); Hoehn et al. Funding models that reflect time/resourcing needed to create trauma-informed environments See: Blewitt et al; Hoehn et al.
& Connections	 Mechanisms to support/enable effective interagency partnerships/cross-sector collaboration See: SAMHSA; Scottish Government; Government of Nova Scotia; Bargeman et al; Melz et al; J Blake, A Kato and J Scott, Whole-of-Government Trauma Strategy, Consultation Paper: Development of a whole-of- government Trauma Strategy for Queensland, Queensland Mental Health Commission, 2024. Supportive and trusting relationships with parents/carers and families See: Scottish Government; Brennan et al; Queensland University of Technology et al. ECEC Interdisciplinary collaboration with external professionals See: Blewitt et al; Sun et al (a); Sun et al (b). Cross-sector collaboration based on shared understanding and language See: Blewitt et al; Sun et al (a); Sun et al (b). Partnerships between ECEC services and families See: Sun et al (c). Whole of organisation commitment to a relational approach See: Sun et al (a); Blewitt et al.
Power Dynamics	 <u>General</u> Strong/effective leadership and governance See: SAMHSA; Scottish Government; Government of Nova Scotia; Bargeman et al; Bunting et al; Queensland University of Technology et al; Melz et al. Leadership buy-in/champions to drive organisational change See: SAMHSA; Scottish Government; Government of Nova Scotia; Bunting et al; Bargeman et al; Queensland University of Technology et al. Governance/leadership includes service users/lived experience and frontline practitioners See: SAMHSA. Engagement, involvement and empowerment of service users/those with lived experience See: SAMHSA. Engagement, involvement and empowerment of service users/those with lived experience See: SAMHSA; National Child Traumatic Stress Network (NCTSN), What's Sharing Power Got to Do with Trauma-Informed Practice?, 2016, NCTSN Fact Sheet; Government of Nova Scotia; Bunting et al; Hoehn et al; Brennan et al; Queensland University of Technology et al. Cultural safety/cultural competence See: SAMHSA; Hoehn et al; Queensland University of Technology et al. Organisational culture reflects trauma-informed principles See: Government of Nova Scotia; SAMHSA. Flattening of organisational hierarchies/power differentials See: Government of Nova Scotia. ECEC Engagement of different levels of ECEC leadership to help promote 'buy-in' See: Sun et al (a); Blewitt et al. ECEC leaders drive organisational change



	 See: Sun et al (a); Blewitt et al; Sun et al (b). Service user (children, parents/carers, families) involvement at all levels of the organisation See: Blewitt et al. Flattening of power differentials in ECEC organisations See: Blewitt et al.
Mental Models	 General Adversity and trauma are widespread - although not equally distributed in society See: Sweetland; Calderon de la Barca et al; Government of Nova Scotia. Healing and recovery from trauma is possible See: Sweetland. Preventing trauma and supporting healing and wellbeing is a collective responsibility See: Sweetland. Unhealed trauma is at the heart of almost all complex social issues See: Calderon de la Barca et al; Milligan et al; I Njaka and D Peacock, 'Addressing Trauma as a Pathway to Social Change', Stanford Social Innovation Review, 21 January 2021. Addressing unhealed trauma is integral to systems change See: Calderon de la Barca et al; Milligan et al; Njaka et al. All children have the right to thrive See: McKenzie et al. Cultural humility/cultural competence See: SAMHSA. Valuing care in all its forms See: McKenzie et al. Trauma-informed mindset is held by all ECEC staff See: Sun et al (a); Blewitt et al.

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